

ENCLOSURE B

PRE-DEPLOYMENT HEALTH ASSESSMENT FORM PROCESSING GUIDANCE

1. Service members must complete or re-validate the health assessment form at their home station or processing station within 30 days of their deployment.
2. The form must be administered and then immediately reviewed by a health care provider. The provider can be a medic or corpsman for administering and initially reviewing the questionnaire. However, positive responses to questions 2-4 and 7-8 must be referred to a physician, physician assistant, nurse, or independent duty medical technician.
3. Copies of the completed form must be placed in the Service members' permanent medical record. The originals will be immediately forwarded to the Deployment Surveillance Team (DST), 5113 Leesburg Pike, Suite 701, Falls Church, Virginia, 22041, DSN 761-7153 (ext. 4727 or 4742) or commercial 703-681-7153 (ext. 4727 or 4742).
4. The DST provides the U.S. Army Center for Health Promotion and Preventive Medicine (USACHPPM) with a pre-deployment health assessment database on a monthly basis for inclusion in the Defense Medical Surveillance System (DMSS).
5. USACHPPM provides the Joint Staff, unified commands, and the Services with periodic trend analysis reports on the completed predeployment health assessment forms.